

| POSITION | INITIALS | NO. | DATE |
|---------------------------|----------|------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | S.H. | 1085 | 4/30 |
| RESPONSE FORMALITY REVIEW | M.H. | 015 | 5/29/01 |
| | | | 09-18-01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
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| Final | |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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10809
9/18/01